PTO/SB/06 (12-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application of Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) NUMBER FILED FEE (\$) NUMBER EXTRA RATE (\$) RATE (\$) FEE (\$) FOR BASIC FEE (37 CFR 1.16(a), (b), or (c)) **SEARCH FEE** (37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE (37 CFR 1.15(a), (b), or (q)) TOTAL CLAIMS = OR minus 20 = (37 CFR 1.18(I)) INDEPENDENT CLAIMS = = minus 3 = (37 CFR 1.18(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR 1.16(a)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160)) TOTAL TOTAL * If the difference in column 1 is less than zero, enter "0" in column 2. (PPLICATION AS AMENDED - PART II OTHER THAN OR (Column 3) **SMALL ENTITY** SMALL ENTITY (Column 2) (Calumn 1) HIGHEST CLAIMS PRESENT ADDI-NUMBER RATE (\$) ADDI-RATE (\$) REMAINING PREVIOUSLY TIONAL TIONAL **EXTRA AFTER** FEE (\$) FEE (\$) ENT AMENDMENT PAID FOR Total pr cFR 1.16(1) Minus $\boldsymbol{\Omega}$ X OR: ENDME Independent (37 CFR 1,16(h)) Minus OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) 2-12-07 HIGHEST CLAIMS RATE (\$) ADDL PRESENT ADDI-NUMBER RATE (\$) REMAINING **PREVIOUSLY** TIONAL **EXTRA** TIONAL **AFTER** FEE (\$) PAID FOR FEE (\$) AMENDMENT EN. Total pr cfR 1.1600 Minus OR ENDM independent (37 CFR 1.16(h)) Minus . OR Application Size Fee (37 CFR 1.18(6)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(f)) OR

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3".

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TOTAL

ADD'L FEE

TOTAL

ADD'L FEE

OR

[&]quot; If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.